# Case 23-41028 Doc 25 Filed 05/31/23 Entered 05/31/23 08:16:06 Main Document Pg 1 of 9

	in this information to identify your cotor 1  Stephanie T						
	otor 2 use, if filing)			_ _			
	ted States Bankruptcy Court for the	: EASTERN DISTRICT	OF MISSOURI				
Cas	se number 23-41028			Ched	ck if this is:		
(If kn	nown)		-		An amende	d filing	
						ent showing postpetition chapt as of the following date:	er
O	fficial Form 106I			_			
	chedule I: Your Inc	ome		N	ИМ / DD/ Y		2/15
spoi atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  11: Describe Employment	ır spouse is not filing wi	ith you, do not include inforr	mation abou	t your spo	use. If more space is neede	
1.	Fill in your employment information.		Debtor 1		Debtor 2	or non-filing spouse	
	If you have more than one job,	Employment status	■ Employed		☐ Employed		
	attach a separate page with information about additional	on about additional			☐ Not employed		
	employers.	Occupation	package loader				
	Include part-time, seasonal, or self-employed work.						
	Occupation may include student or homemaker, if it applies.	Employer's address	55 Glenlake Parkway N Atlanta, GA 30328	<b>E</b>			
		How long employed t	here? 5 months				
Par	t 2: Give Details About Mor	nthly Income					
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to report for	any line, writ	e \$0 in the	space. Include your non-filing	j
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information for all e	employers for	that perso	n on the lines below. If you no	ed
				For De	btor 1	For Debtor 2 or non-filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			\$2	2,124.00	\$ <b>N/A</b> _	
3.	Estimate and list monthly overt	ime pay.	3.	+\$	0.00	+\$ <b>N/A</b>	

Official Form 106l Schedule I: Your Income page 1

4. Calculate gross Income. Add line 2 + line 3.

4. **\$ 2,124.00** 

N/A

# Case 23-41028 Doc 25 Filed 05/31/23 Entered 05/31/23 08:16:06 Main Document Pg 2 of 9

Debt	or 1	Stephanie T Henry	_	С	ase number (if kr	nown)	23-4	1028		
				ì	For Debtor 1			Debtor		
	Cop	by line 4 here	4.		\$2,124	1.00	\$		N/A	<u> </u>
5.	l ist	all payroll deductions:								
٥.	5a.	Tax, Medicare, and Social Security deductions	5a		\$ <b>12</b> 1	.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		. —	0.00	\$-		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.			0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d			0.00	\$		N/A	_
	5e.	Insurance	5e.			0.00	\$_		N/A	_
	5f.	Domestic support obligations Union dues	5f.			0.00	\$_ \$		N/A N/A	_
	5g. 5h.	Other deductions. Specify:	5g. 5h.		:	5.00 0.00	+ \$_		N/A	_
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		·		* *		N/A	_
					·	6.00	· · —			_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	•	\$ 1,918	3.00	\$		N/A	<u></u>
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a		\$ (	0.00	\$		N/A	
	8b.	Interest and dividends	8b		\$ 0	0.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$ (	0.00	\$		N/A	
	8d.	Unemployment compensation	8d		; <del></del>	0.00	\$		N/A	_
	8e.	Social Security	8e		\$	0.00	\$		N/A	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: Food Stamps  Pension or retirement income	e 8f. 8g.			3.00 0.00	\$_ \$		N/A N/A	_
	8h.	Other monthly income. Specify: social security for child	8h			5.00			N/A	_
										_
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,638	3.00	\$_		N/.	<b>A</b>
10.	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	3,556.00	+ \$		N/A	= \$	3,556.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			,	_				,
11.	othe Do r	te all other regular contributions to the expenses that you list in <i>Schedule</i> ade contributions from an unmarried partner, members of your household, your or friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	depe				•	Schedule 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certalies						12.	\$Combi	3,556.00 ned
13.	Do	you expect an increase or decrease within the year after you file this form	?							ly income
		No.								
	П	Yes, Explain:								

Official Form 106l Schedule I: Your Income page 2

# Case 23-41028 Doc 25 Filed 05/31/23 Entered 05/31/23 08:16:06 Main Document Pg 3 of 9

Fill in this information to identify your case:	Ī		
	Chao	k if this is:	
Stephanie T Henry		An amended filing	
Debtor 2			ing postpetition chapter
(Spouse, if filing)		13 expenses as of t	the following date:
United States Bankruptcy Court for the: EASTERN DISTRICT OF MISSOURI	ī	MM / DD / YYYY	
Case number (If known) 23-41028			
(II KIIOWII)			
Official Form 106J			
Schedule J: Your Expenses			12/1
Be as complete and accurate as possible. If two married people are filing together, b information. If more space is needed, attach another sheet to this form. On the top on number (if known). Answer every question.			
Part 1: Describe Your Household			
1. Is this a joint case?			
■ No. Go to line 2.			
☐ Yes. <b>Does Debtor 2 live in a separate household?</b> ☐ No			
☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate House	ehold of Debt	or 2.	
<ul> <li>Do you have dependents? □ No</li> <li>Do not list Debtor 1 and □ Yes. Fill out this information for Dependent's relative to the property of the property of</li></ul>	ionship to	Dependent's	Does dependent
Debtor 2. each dependent Debtor 1 or Debto	or 2	age	live with you?
Do not state the		_	□ No
dependents names. Daughter		8	■ Yes
Daughter		11	□ No ■ Yes
		<del></del>	■ res
Daughter		14	■ Yes
			□ No
Daughter		18	■ Yes
3. Do your expenses include expenses of people other than			
yourself and your dependents?			
Part 2: Estimate Your Ongoing Monthly Expenses			
Estimate your expenses as of your bankruptcy filing date unless you are using this f expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule</i> applicable date.			
Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income			
(Official Form 106I.)		Your expe	enses
<ol> <li>The rental or home ownership expenses for your residence. Include first mortgag payments and any rent for the ground or lot.</li> </ol>	e 4. \$		741.00
If not included in line 4:			
4a. Real estate taxes	4a. \$		0.00
4b. Property, homeowner's, or renter's insurance	4b. \$		0.00
4c. Home maintenance, repair, and upkeep expenses	4c. \$		100.00
<ul><li>4d. Homeowner's association or condominium dues</li><li>5. Additional mortgage payments for your residence, such as home equity loans</li></ul>	4d. \$ 5. \$		0.00

## Case 23-41028 Doc 25 Filed 05/31/23 Entered 05/31/23 08:16:06 Main Document Pg 4 of 9

ebtor 1 S	tephanie i Henry	Case num	oer (if known)	23-41028
. Utilities	:			
	lectricity, heat, natural gas	6a.	\$	240.00
	/ater, sewer, garbage collection	6b.	\$	120.00
6c. To	elephone, cell phone, Internet, satellite, and cable services	6c.		292.00
6d. O	ther. Specify:	6d.	\$	0.00
	nd housekeeping supplies	7.	\$	1.382.00
	re and children's education costs	8.	\$	0.00
	g, laundry, and dry cleaning	9.		110.00
	al care products and services	10.	·	50.00
	I and dental expenses	11.	·	30.00
	ortation. Include gas, maintenance, bus or train fare.		Ψ	30.00
	nclude car payments.	12.	\$	120.00
	inment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	ble contributions and religious donations	14.	\$	0.00
5. <b>Insuran</b>	•		·	
	nclude insurance deducted from your pay or included in lines 4 or 20.			
	ife insurance	15a.	\$	0.00
15b. H	ealth insurance	15b.	\$	0.00
15c. V	ehicle insurance	15c.	\$	0.00
15d. O	ther insurance. Specify:	15d.	\$	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.			
Specify:		16.	\$	0.00
	nent or lease payments:		· <del></del>	
	ar payments for Vehicle 1	17a.	\$	0.00
17b. C	ar payments for Vehicle 2	17b.	\$	0.00
17c. O	ther. Specify:	17c.	\$	0.00
	ther. Specify:	17d.	\$	0.00
	syments of alimony, maintenance, and support that you did not report		<u> </u>	
	ed from your pay on line 5, Schedule I, Your Income (Official Form 106)		\$	0.00
	ayments you make to support others who do not live with you.	,	\$	0.00
Specify:		19.		
Other re	eal property expenses not included in lines 4 or 5 of this form or on So	hedule I: Yo	ur Income.	
20a. M	lortgages on other property	20a.	\$	0.00
20b. R	eal estate taxes	20b.	\$	0.00
20c. P	roperty, homeowner's, or renter's insurance	20c.	\$	0.00
20d. M	laintenance, repair, and upkeep expenses	20d.	\$	0.00
	omeowner's association or condominium dues	20e.	\$	0.00
l. Other: S	Specify:	21.	+\$	0.00
	· · ·			0.00
	te your monthly expenses		_	
	d lines 4 through 21.		\$	3,185.00
22b. Co	py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	2	\$	
22c. Add	d line 22a and 22b. The result is your monthly expenses.		\$	3,185.00
	te your monthly net income.	22	Φ.	
	opy line 12 (your combined monthly income) from Schedule I.	23a.	·	3,556.00
23b. C	opy your monthly expenses from line 22c above.	23b.	-\$	3,185.00
00 - 0	whether the common which is a superior of the common of th		<del>,</del>	
	ubtract your monthly expenses from your monthly income.	23c.	\$	371.00
- 11	he result is your monthly net income.	230.	Ψ	07.1100
4. Do vou	expect an increase or decrease in your expenses within the year after	VOU file this	form?	
	uple, do you expect to finish paying for your car loan within the year or do you expect y			ease or decrease because of
	ion to the terms of your mortgage?	-5-5-F		
■ No.				
☐ Yes.	Explain here:			

## Case 23-41028 Doc 25 Filed 05/31/23 Entered 05/31/23 08:16:06 Main Document Pg 5 of 9

Fill in this information to identify your case:							
Debtor 1	Stephanie T Henr	у					
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name				
(Spouse II, IIIIIIg)	FIISLINAIIIE	Middle Name	Last Name				
United States B	sankruptcy Court for the:	EASTERN DISTRICT O	DF MISSOURI				
Case number	23-41028						
(if known)					Check if this is an amended filing		

### Official Form 106Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below		
Did you pay or agree to pay someone wl	s NOT an attorney to help you fill out bankruptcy forms?	
No		
Yes. Name of person	Attach Bankruptcy Petition Prepared Declaration, and Signature (Official	
hat they are true and correct.  X /s/ Stephanie T Henry	e read the summary and schedules filed with this declaration and	
Stephanie T Henry Signature of Debtor 1	Signature of Debtor 2	
Date <b>May 31, 2023</b>	Date	

Official Form 106Dec

### Case 23-41028 Doc 25 Filed 05/31/23 Entered 05/31/23 08:16:06 Main Document Pg 6 of 9

Fill in this inforr	Fill in this information to identify your case:							
Debtor 1	Stephanie T Henry							
Debtor 2 (Spouse, if filing)								
United States E	Bankruptcy Court for the: Eastern District of Missouri							
Case number (if known)	23-41028							

Check	Check as directed in lines 17 and 21:							
	According to the calculations required by this Statement:							
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).							
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).							
3. The commitment period is 3 years.								
	4. The commitment period is 5 years.							

Check if this is an amended filing

#### Official Form 122C-1

# Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part	1: Calculate Your Average Monthly Income							
1.	What is your marital and filing status? Check one o	nly.						
	■ Not married. Fill out Column A, lines 2-11.							
	☐ Married. Fill out both Columns A and B, lines 2-11.							
10 th	Il in the average monthly income that you received from all 01(10A). For example, if you are filing on September 15, the 6-re 6 months, add the income for all 6 months and divide the total bouses own the same rental property, put the income from that	month per al by 6. Fill	iod would I in the re	be March 1 th sult. Do not inc	rough Au lude any	gust 31. If the amo income amount m	ount of your monthly inconsore than once. For examp	ne varied during ble, if both
					Colui Debt		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	, and co	mmissio	ons (before a	·II \$	2,124.00	\$	
3.	<b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	e payme	nts from	a spouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly p of you or your dependents, including child support from an unmarried partner, members of your househol and roommates. Do not include payments from a spou you listed on line 3.	<b>t.</b> Include d, your c	e regular depende	contributions		0.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor	1					
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	<b>-</b> \$	0.00					
	Net monthly income from a business, profession, or fa	rm \$	0.00	Copy here	->\$	0.00	\$	
6.	Net income from rental and other real property	Debtor						
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	<b>-</b> \$	0.00					
	Net monthly income from rental or other real property	\$	0.00	Copy here	-> \$	0.00	\$	

Case 23-41028 Doc 25 Filed 05/31/23 Entered 05/31/23 08:16:06 Main Document Pg 7 of 9

Case number (if known) 23-41028

			Column A Debtor 1		Column B Debtor 2 non-filing	or	
7.	Interest, dividends, and royalties		\$	0.00	)    \$		-
8.	Unemployment compensation		\$	0.00	) \$		-
	Do not enter the amount if you contend that the amount received was a benefit up the Social Security Act. Instead, list it here:						
	For you \$ 0.00	-					
	For your spouse \$	-					
9.	Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury o disability, or death of a member of the uniformed services. If you received any ret pay paid under chapter 61 of title 10, then include that pay only to the extent that does not exceed the amount of retired pay to which you would otherwise be entitl if retired under any provision of title 10 other than chapter 61 of that title.	e, do or tired	\$	0.00	<b>D</b> \$		
10.	Income from all other sources not listed above. Specify the source and amound not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by United States Government in connection with a disability, combat-related injury of disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.	y the					
	Food Stamps	_	\$	933.00	<b>)</b> \$		_
		_	\$	0.00	) \$		_
	Total amounts from separate pages, if any.	+	\$	0.00	\$		
Part	Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  \$ 2. Determine How to Measure Your Deductions from Income		3,057.00	+ \$			3,057.00  otal average onthly income
12. 13.	. Copy your total average monthly income from line 11.					\$	3,057.00
	You are not married. Fill in 0 below.						
	☐ You are married and your spouse is filing with you. Fill in 0 below.						
	You are married and your spouse is not filing with you.  Fill in the amount of the income listed in line 11, Column B, that was NOT redependents, such as payment of the spouse's tax liability or the spouse's such	uppor	of someor	ne other	than you or yo	ur depend	dents.
	Below, specify the basis for excluding this income and the amount of income adjustments on a separate page.	e dev	oted to ead	ch purpo	se. If necessar	y, list add	itional
	If this adjustment does not apply, enter 0 below.	Φ.					
		₽ \$					
	+9 	*					
		Ψ					
	Total \$		0.0	00_	Copy here=>	<u>-</u> _	0.00
14.	Your current monthly income. Subtract line 13 from line 12.					\$	3,057.00
15.	. Calculate your current monthly income for the year. Follow these steps:						
	15a. Copy line 14 here=>					¢	3,057.00

Stephanie T Henry

Debtor 1

# Case 23-41028 Doc 25 Filed 05/31/23 Entered 05/31/23 08:16:06 Main Document Pg 8 of 9

Debtor 1	Ste	pnanie i Henry	Case number (if known	Case number ( <i>if known</i> ) <b>23-41028</b>					
	M	fultiply line 15a by 12 (the number of month	s in a year).	<b>x</b> 12					
1	5b. T	he result is your current monthly income for	the year for this part of the form.	\$36,684.00					
16. <b>C</b> a	alculat	e the median family income that applies	to you. Follow these steps:	_					
16	Sa. Fill i	n the state in which you live.	MO						
16	b. Fill i	in the number of people in your household.	5						
16	To f	n the median family income for your state and a list of applicable median income amouructions for this form. This list may also be a	unts, go online using the link specified in the separate	\$ <u>111,103.00</u>					
17. <b>H</b> o	ow do	the lines compare?							
17	'a.	•	c. On the top of page 1 of this form, check box 1, Disp o NOT fill out Calculation of Your Disposable Income						
17	'b. C		op of page 1 of this form, check box 2, <i>Disposable inc</i> alculation of Your Disposable Income (Official For 4 above.						
Part 3:	C	alculate Your Commitment Period Under	11 U.S.C. § 1325(b)(4)						
18. <b>C</b> d	ору уо	ur total average monthly income from lin	e 11 .	\$\$					
co sp	ntend to		are married, your spouse is not filing with you, and your 11 U.S.C. § 1325(b)(4) allows you to deduct part of						
10	. II III	o mantai aajaatmont aooo not appiy, iii iii o		Ψ <u></u>					
19	9b. <b>Sub</b>	etract line 19a from line 18.		\$3,057.00					
20. <b>C</b> a	alculat	e your current monthly income for the ye	ear. Follow these steps:						
20	a. Cop	y line 19b		\$3,057.00					
	Mul	tiply by 12 (the number of months in a year)		<b>x</b> 12					
20	b. The	result is your current monthly income for th	e year for this part of the form	\$ 36,684.00					
20	c. Cop	by the median family income for your state a	nd size of household from line 16c	\$ <u>111,103.00</u>					
21	. Hov	v do the lines compare?							
	•	Line 20b is less than line 20c. Unless othe period is 3 years. Go to Part 4.	rwise ordered by the court, on the top of page 1 of thi	is form, check box 3, The commitment					
		Line 20b is more than or equal to line 20c. commitment period is 5 years. Go to Part 4	Unless otherwise ordered by the court, on the top of 4.	page 1 of this form, check box 4, The					
Part 4:	Si	gn Below							
Ву	/ signin	g here, under penalty of perjury I declare th	at the information on this statement and in any attach	ments is true and correct.					
5	Stepha	phanie T Henry							
	•	re of Debtor 1 ay 31, 2023							
	MN	M/DD/YYYY							
If y	you che	ecked 17a, do NOT fill out or file Form 1220	:-2.						
lf y	you che	ecked 17b, fill out Form 122C-2 and file it wi	ith this form. On line 39 of that form, copy your curren	t monthly income from line 14 above.					

Case 23-41028 Doc 25 Filed 05/31/23 Entered 05/31/23 08:16:06 Main Document Pg 9 of 9

Debtor 1 Stephanie T Henry Case number (if known) 23-41028